## **QUARTERLY FINANCIAL STATUS REPORTS**

07/29/94

OEPA DOE-FN 3 REPORT State of Ohio Environmental Protection Agency

P.O. Box 1049, 1800 WaterMark Dr. Columbus, Ohio 43266-0149 (614) 644-3020 FAX (614) 644-2329 Aug 2 10 33 AM '94

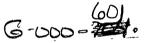
George V. Voinovich Governor

July 29, 1994

0781

Robert N. Mendelsohn Contract Specialist U. S. DOE, Fernald Field Office 7400 Willey Road Cincinnati, OH 45239

Dear Mr. Mendelsohn,



Enclosed you will find 1 original and 1 copy of Quarterly Financial Status Reports (FSR), for:

DE-FG05-940R22167 Cost Recovery for Fernald

If you have any questions, please feel free to call Jim Beaton at 614-644-2926 or Donna Waggener at 614-644-2072.

Sincerely,

Stephen A. Scoles
Deputy Director
Administration

**Enclosures** 

c: Donna Waggener Jim Beaton Joyce Honesty Sue Matthews

## FINANCIAL STATUS REPORT

RC: GM94 OBM Approval 1. Federal Agency and Organizational Element Federal Grant or Other Identifying Number Assigned to Which Report is Submitted By Federal Agency 0348-0039 U.S. DEPT. OF ENERGY DE-FG05-94OR22167 pages CINCINNATI, OHIO DOE COST RECOVERY: FERNA 3. Recipient Organization (Name and complete address, including ZIP code) OHIO ENVIRONMENTAL PROTECTION AGENCY 1800 WATERMARK DRIV P.O. BOX 163669 **COLUMBUS, OHIO 43266-3669** . Employer Identification Number 6. Final Report 7.Base 5. Recipient Account Number or Indentifying Number DE-FG05-94OR22167 31 6402047 GN: X182 Yes Cash X \_Accural 8. Funding Grant Period P. Period covered by this report From:(Month, Day, Year) From: (Month, Day, Year) To: (Month, Day, Year) To:(Month, Day, Year) 03/01/94 09/30/94 03/01/94 06/30/94 10. Transactions: п III **Previously Reported** This Period Cumulative a. Total Outlays 4.977.00 4,977.00 b. Recipient share of outlays 0.00 0.00 0.00 c. Federal share of outlays 0.00 4,977.00 100.009 4,977.00 d. Total unliquidated obligations 29,956.00 e. Recipient share of unliquidated obligations 0.00% 0.00 f. Federal share of unliquidated obligations 29,956.00 g. Total Federal share (Sum of lines c and f) 34,933.00 h. Total Federal funds authorized for this funding period 1,497,589.00 i. Unobligated balance of Federal funds (line h minus line g) 1,462,656.00 a. TYPE OF RATE: X FIXED FEDERAL SHARE PERIOD TOTAL AMOUNT RATE BASE SFY94 17.81% 1,538.00 274.00 274.00 SFY95 20.40% 0.00 0.00 0.00 11. INDIRECT SFY96 0.00% 0.00 0.00 0.00 **CUMULATIVE** 0.00 0.00% **EXPENSE** 0.00 0.00 0.00 TO-DATE 0.00 0.00% 0.00 0.00 0.00 TOTAL INDIRECT: 1,538.00 274.00 274.00 12. Remarks: Attach any explanations deemed necessary or information required by federal sponsoring agency in compliance with governing legislation. I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents. Typed or Printed Name and Title Telephone (Area code, number and extension) PAUL M. STIERS, CHIEF (614) 644 2339 FISCAL ADMINISTRATION Signature of Authorized Certifying Official Date Report Submitted Fondo R. Schegarlinger

James T. Beaton

Standard Form 269A(REV 4-88) Prescribed by OMB Circulars A-102 and A-110

614-644-2926

Telephone (Area code, number and extension)



## FINANCIAL STATUS REPORT

5 7 8 I

			<del></del>				KC. OM34	
Federal Agency and Organizational Element			2. Federal Grant or Other Identifying Nur	nber Assigned	OBM Approval	Page	of	
to Which Report is Submitted			By Federal Agency		No.			
U.S. DEPT. OF ENERGY			DE-FG05-94OR22167		0348-0039		pages	
CINCINNATI, OHIO DOE COST RECOVERY: FERNA						1	1	
3. Recipient Organizat		mplete address, inclu	<del></del>			<u> </u>	<del></del>	
OHIO ENVIRO	ONMENTAL P 1ARK DRIV I	ROTECTION AG P.O. BOX 163669	=		·			
. Employer Identification Number 5. Recipient Account Number			ber or Indentifying Number 6. Final Rep		ort	7.Base		
31 6402047 GN: X182			DE-FG05-94OR22167 Yes		_X_ No	Cash	_XAccural	
8. Funding Grant Period . 9. Period covered to					by this report			
From: (Month, Day, Year)  To: (Month, Day, Year)  From: (Month, Day, Year)  03/01/94  03/01/94  70: (Month, Day, Year)  03/01/94					Day, Year)	To:(Month, Day, Year) 06/30/94		
10. Transaction	ns:		· · - · - · - · · - · · · · · · · ·		I	II	III	
	÷				Previously Reported	This Period	Cumulative	
a. Total Outlays					0.00	4,977.00	4.077.00	
b. Recipient share of outlays					0.00	4,977.00	4,977.00	
				0.00%	0.00	0.00	0.00	
c. Federal share of outlays					. 0.00	4,977.00	4,977.00	
d. Total unliquidated obligations							29,956.00	
e. Recipient share of unliquidated obligations							0.00	
f. Federal share of unliquidated obligations								
g. Total Federal share (Sum of lines c and f)							29,956.00	
· ·							34,933.00	
h. Total Federal funds authorized for this funding period							1,497,589.00	
i. Unobligated balance of Federal funds (line h minus line g)							1,462,656.00	
	a. TYPE O	F RATE:	X FIXED				1,402,030.00	
•				b. RATE	BASE	TOTAL AMOUNT	FEDERAL SHARE	
			SFY94	17.81%		274.00	274.00	
:			SFY95	20.40%	,	0.00	0.00	
11. INDIRECT			SFY96	0.00%	****	0.00	0.00	
EXPENSE	CUMULA	TIS/E	0.00	0.00%			į į	
EAFENSE	TO-DAT		0.00	0.00%	'	0.00	0.00	
-	10-DAI	ט	TOTAL INDIRECT:	0.0070	0.00 1,538.00	0.00 274.00	0.00 274.00	
12. Remarks: Atta	ch any explana	ions deemed nece	ssary or information required b	y federal spor				
•	• •				,	<b>.</b> ,		
12.0 (17)	T	1.1				141.4.11.41		
13. Certification:	-		nowledge and belief that the control of the control of the purposes set fort	-	-	that all outlays and		
Typed or Printed Nam	Typed or Printed Name and Title  Telephone (Area code, number and extension)							
PAUL M. STIERS, CHIEF					(614) 644 2339			
FISCAL ADMINISTRATION							ļ	
Signature of Authorized Certifying Official					Date Report Submitted			
		•						
Donald R. Schaga lingto								
PREPARED BY:		- 507			Telephone (Area code, number	and extension)		
James T. Beaton					614-644-2926			

Standard Form 269A(REV 4-88)
Prescribed by OMB Circulars A-102 and A-110